

ENTERED

# WATER WELL REPORT

STATE OF WASHINGTON

Start Card No. 072768

UNIQUE WELL I.D. #

Water Right Permit No. 33-2-20N

(1) OWNER: Name J. LINDEMANS Address 2235 COVE DR, OAK HARBOR WA, 98277

(2) LOCATION OF WELL: County ISLAND COUNTY SW 1/4 SW 1/4 Sec 20 T. 33 N. R. 2E W.M.

(2a) STREET ADDRESS OF WELL (or nearest address) COACHMAN ACRES, OAK HARBOR WA, 98277

(3) PROPOSED USE: ☒ Domestic ☐ Industrial ☐ Municipal ☐  
☐ Irrigation ☐ Test Well ☐ Other ☐  
☐ DeWater ☐

## (10) WELL LOG or ABANDONMENT PROCEDURE DESCRIPTION

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of information.

(4) TYPE OF WORK: Owner's number of well (if more than one) 1  
Abandoned ☐ New well ☒ Method: Dug ☐ Bored ☐  
Deepened ☐ Cable ☒ Driven ☐  
Reconditioned ☐ Rotary ☐ Jetted ☐

(5) DIMENSIONS: Diameter of well 6 inches.  
Drilled 283 feet. Depth of completed well 283 ft.

## (6) CONSTRUCTION DETAILS:

Casing installed: 6 - Diam. from 0 ft. to 273 ft.  
Welded ☒ - Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Liner installed ☐ - Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Threaded ☐ - Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Perforations: Yes ☐ No ☒

Type of perforator used \_\_\_\_\_

SIZE of perforations \_\_\_\_\_ in. by \_\_\_\_\_ in.

\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

\_\_\_\_\_ perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Screens: Yes ☒ No ☐

Manufacturer's Name COOK SCREEN

Type STAINLESS STEEL Model No. 304

Diam. 6 Slot size 10 from 273 ft. to 278 ft.

Diam. 6 Slot size 12 from 278 ft. to 283 ft.

Gravel packed: Yes ☐ No ☒ Size of gravel \_\_\_\_\_

Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

Surface seal: Yes ☒ No ☐ To what depth? 20 + ft.

Material used in seal BENTONITE

Did any strata contain unusable water? Yes ☐ No ☒

Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_

Method of sealing strata off \_\_\_\_\_

(7) PUMP: Manufacturer's Name \_\_\_\_\_ H.P. \_\_\_\_\_  
Type: \_\_\_\_\_

(8) WATER LEVELS: Land-surface elevation 255 ft.  
above mean sea level

Static level 237 ft. below top of well Date 11-97

Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_

Artesian water is controlled by \_\_\_\_\_ (Cap, valve, etc.)

## (9) WELL TESTS: Drawdown is amount water level is lowered below static level

Was a pump test made? Yes ☐ No ☒ If yes, by whom? \_\_\_\_\_

Yield: \_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

" " " " " "

" " " " " "

Recovery data (time taken as zero when pump turned off) (water level measured from well top to water level)

Time Water Level Time Water Level Time Water Level

Date of test \_\_\_\_\_

Bailer test 15 gal./min. with 10 ft. drawdown after 2 hrs.

Airtest \_\_\_\_\_ gal./min. with stem set at \_\_\_\_\_ ft. for \_\_\_\_\_ hrs.

Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_

Temperature of water \_\_\_\_\_ Was a chemical analysis made? Yes ☐ No ☒

RECEIVED

NOV 17 1997

Department of Ecology

Work Started Nov 1997 Completed Nov 14 1997

## WELL CONSTRUCTOR CERTIFICATION:

I constructed and/or accept responsibility for construction of this well, and its compliance with all Washington well construction standards. Materials used and the information reported above are true to my best knowledge and belief.

NAME WHIDBEY DRILLERS  
(PERSON, FIRM, OR CORPORATION) (TYPE OR PRINT)

Address OAK HARBOR WA 98277

(Signed) Rennie Faler License No. 129  
(WELL DRILLER)

Contractor's  
Registration  
No. WHIDBWD299MM Date Nov 14 1997

(USE ADDITIONAL SHEETS IF NECESSARY)

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